

**SAN JOAQUIN COUNTY PROBATION DEPARTMENT
JUVENILE DETENTION POLICY AND PROCEDURE MANUAL**

TO: ALL STAFF

BULLETIN #: D-600

APPROVED BY: STEVE JACKSON

REPLACES: 1/17/2023

CHIEF PROBATION OFFICER

ISSUED: 02/02/2026

SUBJECT: ROOM CONFINEMENT

POLICY

Room Confinement shall not be used before other less restrictive options have been attempted and exhausted, unless attempting those options poses a threat to the safety or security of any youth or staff. Room Confinement shall not be used for the purposes of punishment, coercion, convenience, or retaliation by staff. Room Confinement shall not be used to the extent that it compromises the mental and physical health of the youth.

PROCEDURES

A. General Guidelines

1. Staff shall follow the Camp Peterson and the Juvenile Justice Center Behavior Management System.
2. The Behavioral Management System (BMS), which outlines minor and major rule violations as well as the sanction, is provided to all youth in the Youth Handbook and is posted on all the living units and Camp Peterson. Provisions are made to provide accessible information to youth with disabilities, limited English proficiency, or limited literacy.
3. Room Confinement may be used for behavior that threatens the safety of youth or others. Room Confinement shall not be used before other less restrictive options have been attempted and exhausted, unless attempting those options poses a threat to the safety or security of any youth or staff.
4. Room Confinement shall only continue until the situation has de-escalated and the youth no longer voices intention or behaviors that suggest imminent risk.
5. All incidents resulting in Room Confinement shall be documented via an Incident Report in the case management system and reviewed by the Juvenile Detention Unit Supervisor (JDUS) and the Duty Officer.
6. All incidents of Room Confinement must be authorized by the Duty Officer. Staff are authorized to act to ensure safety, including initial placement of youth in a room,

however, once the incident is stabilized, the Duty Officer's authorization is required for Room Confinement.

7. This section does not apply during an extraordinary emergency circumstance that requires a significant departure from normal institution operations, including a natural disaster or facility-wide threat that poses an imminent and substantial risk of harm to multiple staff or youth. This exception shall apply for the shortest amount of time needed to address this imminent and substantial risk of harm.
8. The section does not apply when a youth is placed in a locked cell or sleeping room to treat and protect against the spread of a communicable disease for the shortest amount of time required to reduce the risk of infection, with the written approval of a licensed physician or nurse practitioner, when the youth is not required to be in an infirmary for an illness.
9. This section does not apply when a youth is placed in a locked cell or sleeping room for required extended care after medical treatment with the written approval of a licensed physician or nurse practitioner, when the youth is not required to be in an infirmary for illness.

B. Initial Room Confinement Assessment

1. JDUS Assessment
 - a. Upon receiving authorization by the Duty Officer, the JDUS or JDO shall initiate the Room Confinement Assessment and Activity Report (Attachment A).
 - b. The reason for Room Confinement shall be documented, including what other less restrictive options have been attempted and exhausted, as well as the behavioral evidence warranting continued Room Confinement.
 - c. The JDUS will notify Behavioral Health Services (BHS) and the Youth Advocate advising them of the name of the youth, the housing unit, and the time he/she was placed on Room Confinement.
 - d. Within one hour of being placed on Room Confinement, the JDUS or JDO will complete an interactive assessment with the youth to determine if further confinement is necessary. The assessment should include observing the youth's present behavior, determining the presence or absence of articulable indicators of an imminent risk to safety. The JDUS or JDO will determine as part of this assessment whether Behavioral Health Services and/or continued counseling is required.
 - e. The JDUS or JDO shall document his/her comments and recommendations on the Room Confinement Assessment and Activity Report.
 - f. The Duty Officer approves or disapproves Room Confinement.

2. Youth Advocate Assessment

- a. The Youth Advocate, or their designee, will meet with the youth as soon as practical to assess the youth and ensure the appropriate service providers have evaluated the youth and documented their comments on the Room Confinement Assessment and Activity Report. The youth will not be held in Room Confinement awaiting a review by the Youth Advocate. If the youth is already released, the Youth Advocate will review that protocol was followed.
- b. The Youth Advocate shall document their comments and recommendations on the Room Confinement Assessment and Activity Report.

3. Behavioral Health Services Assessment

- a. A Behavioral Health Services staff will meet with the youth as soon as practical to conduct a behavioral assessment, which includes a mental and emotional status evaluation regarding mental health concerns. BHS staff will work closely with the youth, Detention staff, and Administration to provide appropriate services to the youth. The youth will not be held in Room Confinement awaiting a review by the Behavioral Health Services staff. If the youth is already released, the Behavioral Health Services staff will provide services to support continued stabilization of the youth.
- b. The BHS staff shall document their comments and recommendations on the Room Confinement Assessment and Activity Report.

4. Medical Clinic Assessment

- a. Clinic staff will conduct an assessment as soon as practical on all youth who have been placed on Room Confinement. Clinic staff will identify and address any medical issues reported by the youth or staff. The youth will not be held in Room confinement awaiting a review by Medical Clinic staff. If the youth is already released, the Medical Clinic staff will administer necessary medical care.
- b. The Medical Clinic staff shall document their comments and recommendations on the Room Confinement Assessment and Activity Report.

C. Release from Room Confinement

1. When the youth no longer poses a risk to safety, the youth is to return to general population.
2. The parties that assess the youth during the period of Room Confinement (JDUS, JDO, Youth Advocate, Behavioral Health Services staff, and Medical Clinic staff) determine what potential there is for a return to threatening and dangerous behavior.
3. If there is a recommendation from the JDUS or JDO, the Youth Advocate and/or Behavioral Health Services staff for a youth to be released from Room Confinement,

the JDUS shall immediately contact the Duty officer and indicate on the Room Confinement Assessment and Activity Report the time the Duty Officer was notified.

4. The Duty Officer shall make the final determination for a youth to be released or continue Room Confinement.
5. If the Duty Officer is unable to physically appear on the housing unit within 15 minutes to release the youth from Room Confinement, they shall give verbal authorization to the JDUS or JDO to release the youth. The Duty Officer shall then complete the paperwork prior to the end of shift. The Duty Officer shall record the time the youth was released from Room Confinement on the Room Confinement Assessment and Activity Report.

D. Continued Room Confinement Assessment

1. If a youth is on Room Confinement at the beginning of a shift, the Room Confinement Assessment and Activity Report will be completed by the JDUS or JDO within thirty minutes of the start of the shift for both the AM and PM shifts and then every thirty minutes thereafter.
2. If a youth has not been released to general population prior to the 3rd hour of Room Confinement, the JDUS or JDO shall notify the Duty Officer.
3. Once the Duty Officer is notified by the JDUS or JDO of possible continued Room Confinement, they must assess the youth and determine if Room Confinement will exceed four (4) hours.
4. Prior to obtaining authorization from Detention Administration to continue a youth on Room Confinement for more than four (4) hours, the Duty Officer shall:
 - a. Assess the youth by meeting with the youth to assess the youth's current demeanor and verbalizations.
 - b. Review any available assessments conducted by the JDUS or JDO, the Youth Advocate, Behavioral Health Services staff, and Medical staff.
 - c. Contact Behavioral Health Services staff for a re-assessment of the youth.
 - d. Contact Medical Clinic staff for a re-assessment of the youth.
 - e. Develop an Individualized Plan (Attachment A) with the youth that identifies goals and objectives to be met in order to reintegrate the youth's return to general population.
 - f. This Individualized Plan (Attachment A) will specify a safety plan to begin the process of full integration back into general population. The plan may include provisions such as: close staff monitoring, restriction to certain areas of the unit, activities on alternative units that remove potential triggers for aggression, and temporary restriction from specified activities. A plan,

negotiated with the youth, will be established in the event of increased aggressive thoughts or behaviors. Any provisions must be in an effort to reduce a potential return for safety threats and not as a sanction or in retaliation. It is acceptable for sanctions appropriately selected based on the sanction grid be imposed even if they restrict full access to general population activities.

- g. Document the basis for the extension of Room Confinement beyond (4) four hours, and the date and time the youth was initially placed on Room Confinement.
5. The Duty Officer shall immediately notify a Detention Administrator if a youth is approaching four (4) hours (excluding the hours of 9 p.m. to 6 a.m. and for medical reasons) and be prepared to discuss the assessments that have occurred as well as share a copy of the individualized goals and objectives that have been developed for the youth.
6. If authorization is given from a Detention Administrator for Room Confinement to extend beyond four (4) hours, the Duty Officer shall obtain documented authorization from Detention Administration every two (2) hours thereafter. At that time, the Duty Officer shall be prepared to discuss the assessments that have occurred as well as share a copy of the updated individualized goals and objectives for the youth.
7. The Room Confinement Assessment and Activity Report(s) (Attachment A) shall remain on the housing unit until the youth has been released from Room Confinement. The completed packet shall then be forwarded to the Youth Advocate.
8. The Youth Advocate shall review the Room Confinement Assessment and Activity Report for accuracy and completeness and forward the report to the Compliance JDFS.
9. The Compliance JDFS shall review the Room Confinement Assessment and Activity Report, for training and compliance, and forward the report to Detention Administration.
10. Detention Administration shall ensure required tracking for all youth placed on Room Confinement. At any time during the review processes, the Youth Advocate, or the Compliance JDFS, shall advise the chain of command of all incidents where a youth has been separated to his/her room for more than four (4) hours.

D. Criteria for Releasing or Continuing a Youth on Room Confinement

After a youth has de-escalated, they should be released from Room Confinement.

Room Confinement Assessment and Activity Report

(To be completed whenever a youth is on Room Confinement)

Youth's Name _____ Date _____

Age _____ J # _____ Unit _____

Reason for Room Confinement _____

Other Less Restrictive Options Attempted and Exhausted _____

<u>Youth Removed From Room</u>	Start Time	End Time	Staff Initials
Personal Hygiene	/		
School	/		
Large Muscle Exercise	/		
BHS Services	/		
Medical Services	/		
Religious Services	/		
Visitation	/		
Telephone	/		
Letter Writing	/		

Behaviors Observed During Room Confinement:

JDUS/JDO Assessment (Within 1 hour of confinement and/or start of shift/every 30-minutes thereafter)

Date: Time: JDUS/JDO: Continued/Released: Specify observed behavior justifying continued room confinement:

Youth to be released from room confinement Date: _____ Time: _____

Duty Officer Name: _____ NO YES

Youth Advocate Assessment (as soon as practical)

Youth assessed by Youth Advocate: _____ at _____

Date

Time

Comments/Rec. _____



Youth Advocate Print/Signature

Behavior Health Services Staff Assessment (as soon as practical)

Youth assessed by Behavioral Health Services: _____ at _____

Date

Time

Comments/Rec. _____



Behavioral Health Services Print/Signature

Medical Clinic Staff Assessment (as soon as practical)

Youth assessed by Clinic Staff: _____ at _____

Date

Time

Comments/Rec. _____



Clinic Staff Print/Signature

JDFS Assessment (every 2-hours)

Youth assessed by Duty Officer:

Date: _____ Time: _____ JDFS Name: _____ Continued/Released: _____

Specify observed behavior justifying continued room separation:

Youth was released from room confinement _____ at _____

Date

Time

Reviewed by DCPO/ADCPO: Name Print/Signature: _____



Date: _____ Time: _____

***Individualized Plan: Developed as a part of the process for returning the youth to general population**

JDFS Assessment (every 2-hours)

Youth assessed by Duty Officer:

Date: _____ Time: _____ JDFS Name: _____ Continued/Released: _____ Specify observed behavior justifying continued room separation:

- Youth to remain on room confinement beyond four hours (shall do the following).
 - Youth was assessed by Duty Officer meeting with youth to assess youth's current demeanor and verbalizations
 - Youth was re-assessed by Youth Advocate
 - Youth was re-assessed by Behavioral Health Services staff
 - Youth was re-assessed by Medical Clinic staff
 - All available assessments conducted by the JDUS, the Youth Advocate, Behavioral Health Services staff, and Medical staff were reviewed
 - Basis for extension of Room Confinement

- Individualized Plan was developed with the youth that identifies goals and objectives to be met in order to reintegrate the youth's return to general population.

- Individualized Plan developed with goals and objectives for reintegration
Goal: Ensure for safe transition from Room Confinement to General Population
 - Objective: Identify potential risk for aggression re-emergence

 - Objective: Determine activities that pose high risk for return of aggression and eliminate these activities for initial reintegration
 - Unit or Room change
 - Meals
 - School
 - Shower
 - Programming
 - Recreation
 - Other: _____

 - Objective: Develop a monitoring system to increase on-going safety
 - Activities with designated peers or excluding designated peers
 - Assigned seating and permission to leave seat required
 - JDUS in close proximity at all times
 - Reinforced staffing during full general population integration
 - Check in with JDUS every _____ minutes
 - Other: _____
 - Other: _____

Goal: Reduce the likelihood of future aggressive behavior

- Objective: Identify skills to reduce aggression and emotional reactions
 - Meet with staff to complete a CCP Tool related to the current incident
 - Learn 3 strategies to calm down when emotionally upset
 - Identify risky thoughts that lead to dangerous behavior and replace thoughts

Attachment A (page 1 of 3)

- List 3 social skills that may be useful to avoid acting on risky thoughts or impulses and practice them with you JDUS
- Participate in a conflict resolution session
- Meet with staff to go through the steps for Problem Solving to resolve issues
- Other: _____
- Other: _____

Goal: Increase on-going review and planning for youth

- Objective: Develop a comprehensive plan for behavior management for youth
 - Periodic reviews with multidisciplinary team (education, mental health, probation, etc.)
 - Participation in treatment programming
 - Discharge planning for on-going support
 - Involvement of family/guardian and other community supports
 - Negotiation of Behavioral Contract
 - Other:
 - Other:

Request to Extend Room Confinement:

Denied by: Administrator: Date: Time:

Youth was released from room confinement: Date: _____ Time: _____

Approved by: Administrator: Date: Time:

Continued Room Confinement for up to an Additional Two Hours

JDUS Assessment (Within 1 hour of confinement and/or start of shift/every 30-minutes thereafter)

Date: Time: JDUS Name: Continued/Released: Specify observed behavior justifying continued room confinement:

Youth to be released from room confinement. Date: _____ Time: _____

Duty Officer Name: _____

Youth Advocate Assessment (as soon as practical)

Youth assessed by Youth Advocate: _____ at _____
Date _____ Time _____

Comments/Rec. _____

Youth Advocate Print/Signature

Behavior Health Services Staff Assessment (as soon as practical)

Youth assessed by Behavioral Health Services: _____ at _____
Date _____ Time _____

Attachment A (page 2 of 4)

Comments/Rec. _____

Behavioral Health Services Print/Signature _____

Medical Clinic Staff Assessment (as soon as practical)

Youth assessed by Clinic Staff: _____ at _____ Date _____ Time _____

Comments/Rec. _____

Clinic Staff Print/Signature _____

JDFS Assessment (every 1-hour)

Youth assessed by Duty Officer for Continued Room Confinement up to 2-additional hours:

Date: _____ Time: _____ JDFS Name: _____ Continued/Released: _____ Specify observed behavior justifying continued room confinement:

Youth was released from Room Confinement _____ at _____ Date _____ Time _____

Youth to remain on Room Confinement beyond additional two hours (shall do the following).

- Youth was re-assessed by Duty Officer meeting with youth to assess youth's current demeanor and verbalizations
- Youth was re-assessed by Youth Advocate
- Youth was re-assessed by Behavioral Health Services staff
- Youth was re-assessed by Medical Clinic staff
- All available assessments conducted by the JDUS, the Youth Advocate, Behavioral Health Services staff, and Medical staff were reviewed
- Basis for extension of Room Confinement

Individualized Plan was developed with the youth that identifies goals and objectives to be met in order to reintegrate the youth's return to general population.

*Individualized Plan: Developed as a part of the process for returning the youth to general population

Individualized Plan developed with goals and objectives for reintegration
Goal: Ensure for safe transition from Room Confinement to General Population

- Objective: Identify potential risk for aggression re-emergence

- Objective: Determine activities that pose high risk for return of aggression and eliminate these activities for initial reintegration
 - Unit or Room change
 - Meals
 - School
 - Shower
 - Programming
 - Recreation
 - Other: _____

- Objective: Develop a monitoring system to increase on-going safety
 - Activities with designated peers or excluding designated peers

Attachment A (page 3 of 4)

- Assigned seating and permission to leave seat required
- JDUS in close proximity at all times
- Reinforced staffing during full general population integration
- Check in with JDUS every _____ minutes
- Other: _____
- Other: _____

Goal: Reduce the likelihood of future aggressive behavior

- Objective: Identify skills to reduce aggression and emotional reactions
 - Meet with staff to complete a CCP Tool related to the current incident
 - Learn 3 strategies to calm down when emotionally upset
 - Identify risky thoughts that lead to dangerous behavior and replace thoughts
 - List 3 social skills that may be useful to avoid acting on risky thoughts or impulses and practice them with you JDUS
 - Participate in a conflict resolution session
 - Meet with staff to go through the steps for Problem Solving to resolve issues
 - Other: _____
 - Other: _____

Goal: Increase on-going review and planning for youth

- Objective: Develop a comprehensive plan for behavior management for youth
 - Periodic reviews with multidisciplinary team (education, mental health, probation, etc.)
 - Participation in treatment programming
 - Discharge planning for on-going support
 - Involvement of family/guardian and other community supports
 - Negotiation of Behavioral Contract
 - Other: _____
 - Other: _____
- Request to Extend Room Confinement:
 - Denied by: Administrator: _____ Date: _____ Time: _____
 - Youth was released from room separation: Date: _____ Time: _____
 - Approved by: Administrator: _____ Date: _____ Time: _____

Reviewed by DCPO/ADCPO: Name Print/Signature: _____

Date: _____ Time: _____

Attachment A (page 4 of 4)